## IDAHO STATE DEPARTMENT OF EDUCATION (SDE) WAIVER FORM FOR CURRICULAR MATERIALS (TEXTBOOKS)

A separate waiver form is required for each curricular material/textbook title. Either the School or the Publishing Company MUST provide written correlation of the requested curricular material/textbook identified on this Form to the current content knowledge and skills of Idaho Content Standards / Common Core State Standards: (http://www.sde.idaho.gov/site/content\_standards/) For materials requesting approval as Research Based, additional requirements include a copy of publisher's efficacy studies, specific to grade level and program. All Waiver Requests must be accompanied by a letter of justification on why district is deviating from state approved materials, correlations, and copy(s) of curricular material/textbook and received BEFORE authorized SDE agent can review. Mail or e-mail completed form with all required documentation and material(s) to: Elizabeth Flasnick, Curricular Materials Specialist, Idaho State Department of Education, PO Box 83720, 650 W State Street, Boise ID 83720-0027. Phone: 208-332-6967, eflasnick@sde.idaho.gov

authorized SDE agent can review. Mail or e-mail commaterial(s) to: Elizabeth Flasnick, Curricular Materials Spe 83720, 650 W State Street, Boise ID 83720-0027. Phone: 20	cialist, Idal	no State Departmei	nt of Education, PO Box
Use additional pages as necessary – F About the School District			-
District Name:			District Number:
About the School when requesting multi-school or district wide approval	– identify all so	hools and use superinter	ndent name, email and signature.
School Name: (where materials will be used)	Principal/Superintendent Name: (please type)		
Address: (shipping address, city, state, ZIP)	Principal/Superintendent Signature:		
Contact Person Requesting Waiver Approval: (please type)	Contact Person's Phone Number:		
Signature of Contact Person:	Contact Person's E-mail Address:		
About the Material(s)	1		
Title of the Material:		Name of Author(s):	
Name of Publishing Company:		Copyright Date:	ISBN:
For which subject area/class do you intend to use this mate	erial?		'
What other materials are being used at this level in your school DISTRICT by students for this subject area/class?			
What type of evaluation is planned or being used to determine the effectiveness of this material?			
About the School Board – This Form MUST be Approve			
Name of School Board Chairman Granting Approval:  Date of approved from Local School Board			School Board:
Signature:			
State Department of Education (SDE)			Date Approved
Elizabeth Flasnick is the SDE Authorized Agent for Granting Approval of	f all Waiver F	orms	Revised: May 2012